

INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Entry

COMMITTEE NAME (Must be same as on Statement of Organization)

Borman for Auditor

MAY 18 2005

IMPORTANT: Indicate type of committee you are reporting for: ☐(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee

CANDIDATE COMMITTEES ONLY:

Candidate Name:

Joann Borman

Political Party

Democrat

Office Sought

Auditor

District (if Senate or House)

FORM

DR-2

(Rev. 07/2003)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

17683

Logged In

DM

Scanned

Computer

DM

Audited

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 5-19-05 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate one ☐☐ CHECK IF AMENDMENT TO REPORT DATED _____☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) \$ 94.78

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ -0-

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐

YES

☐

NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

FOR INSTRUCTIONS, SEE BACK OF FORM

Res. 0010

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

B

(Rev. 07/03)

MONETARY

EXPENDITURES

CHECK THIS BOX IF
AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/1/05	ID# CK# 141	Garrigan, Seton North McCoy Algona Iowa 50511	to close account Tuition for students	\$ 94.78
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 94.78
TOTAL (if last page of this schedule)				\$ 94.78

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to person/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page _____ of _____

(For Schedule B)